

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>T-G</i>	<i>32</i>	<i>9/6/01</i>
O.I.P.E. CLASSIFIER	<i>mu</i>	<i>1019</i>	<i>9/12</i>
FORMALITY REVIEW			<i>10-09-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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SM/864
10/8/01